

AVAILBLE COPY

MULTIPLE DEPEN.
FEE CALCULATION SHEET
(FOR USE WITH FEE SCHEDULE XTO-875)

CLAIM

SERIAL NO.

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1						
2	C	C					
3		1					
4		1					
5		1					
6		1					
7		1					
8		1					
9		1					
10		1					
11		1					
12		1					
13		1					
14		1					
15		1					
16	1						
17	C	C					
18		1					
19	C	C					
20	1						
21	1						
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48							
49							
50							
TOTAL IND.	6		↓		↓		↓
TOTAL DEP.	15	←		←		←	
TOTAL CLAIMS	21	[REDACTED]		[REDACTED]		[REDACTED]	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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98							
99							
100							
TOTAL IND.			↓		↓		↓
TOTAL DEP.		←		←		←	
TOTAL CLAIMS		[REDACTED]		[REDACTED]		[REDACTED]	